

# FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information		
Date of Inspection: June 20, 2023	Name of Inspector: Melissa Meikle	
Inspection Type: Routine Inspection		
Licensee: ACC-003281 - 3673928 Ontario Inc		
Retirement Home: Manoir McGill 342		
License Number: N0246		

# **About Routine Inspections**

A routine inspection, performed by an RHRA inspector, is a physical inspection of a licensed retirement home. During a routine inspection, an RHRA inspector will walk through the home, speak to residents and staff, observe care services and conditions in the home, and ensure the licensee's management and staff follow mandatory policies and practices designed to protect the welfare of residents.

Following a routine inspection, the RHRA inspector prepares a draft inspection report which is sent to the licensee. The draft report may include instances where the licensee has failed to meet the standards of the RHA. If included, the licensee can respond to these instances and is strongly encouraged to inform RHRA of its plans to meet the standards of the RHA.

Following the draft report, the RHRA inspector prepares this final inspection report, incorporating any response from the licensee with their plans to meet the standards of the RHA. The most recent final inspection report must be posted in the home in a visible and easily accessible location. All final inspection reports from the previous two years must also be made available in an easily accessible location in the home. The licensee must provide a copy of this report to the home's Residents' Council, if one exists.

In addition to inspection reports, RHRA may provide information to a licensee to encourage improvements of their current practices.

If the licensee repeatedly does not meet the required standards, RHRA may take further action.

# **Focus Areas**

During a routine inspection, an inspector will focus primarily on a set number of areas which have been identified as related to the health, safety and wellbeing of resident, and may take various actions to determine whether the licensee is compliant with the RHA in relating to the areas. The areas listed in this section are ones which an inspector has identified as non-compliant.

#### Focus Area #1: Behaviour Management and Dementia Care

#### **RHRA Inspector Findings**

As part of the inspection, the Inspector reviewed resident charts and found 1 resident had exhibited behaviours that posed a risk of harm to themselves or others in the home. The Licensee did not develop written behaviour management strategies for interventions to prevent and address the resident's behaviours that pose a risk to the resident or others in the home. The Licensee failed to implement Behaviour Management strategies as prescribed.

# Outcome

The Licensee has demonstrated it has taken corrective action to achieve compliance.

# Focus Area #2: Emergency Plan

### **RHRA Inspector Findings**

As part of the inspection the inspector reviewed the Licensee's records of testing for their emergency plans and found that there is no record of testing for situations involving the loss of essential services, medical emergency, violent outburst and a missing resident. The Licensee failed to ensure that testing was done annually as required.

#### Outcome

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

#### Focus Area #3: Medications

### **RHRA Inspector Findings**

As part of the inspection, the inspector observed medication administration and confirmed that drugs or other substances were not always stored in a locked and secured medication cart. The Licensee failed to ensure that the drugs or other substances are stored in a medication cart that is locked and secure as prescribed.

#### **Outcome**

The Licensee has advised it has taken corrective action to achieve compliance. RHRA to confirm compliance by following up with the Licensee or by inspection.

# Focus Area #4: Staff Training

### **RHRA Inspector Findings**

As part of the inspection in response to the allegation, the inspector reviewed staff training records and found that annual staff training had not been completed in 2022. Specifically, training on; the Residents' Bill of Rights, zero tolerance of abuse and neglect policy, protection afforded for whistle-blowing, behaviour management, personal assistance services devices policy, complaints procedures, fire prevention and safety, emergency plan and the infection prevention and control program. Furthermore, there was no annual training in the procedures applicable to the administration of the drug. The Licensee failed to ensure that staff were trained as required.

## Outcome

The Licensee provided information indicating that corrective action was being taken, however, further action must be taken to achieve compliance with all areas outlined in the finding. RHRA to confirm compliance by following up with the Licensee or by inspection.

#### **Additional Findings**

During a routine inspection, an inspector may observe areas of non-compliance that are not related to the standard focus areas. In these cases, an inspector may cite the home for these contraventions at the time of this inspection. In addition, an inspector may follow-up on findings of non-compliance from previous inspections. Where the licensee is unable to demonstrate they have come into compliance or maintained compliance, an inspector may cite the home for these repeat contraventions at the time of this inspection.

# **Not Applicable**

#### **Current Inspection – Citations**

Citations relating to the above Focus Areas or Additional Findings made during the current inspection are listed below.

# The Licensee failed to comply with the RHA s. 14. (2); Staff training

# s. 14. (2); Staff training

14. (2) For the purposes of subsection 65 (4) of the Act, the licensee shall ensure that the persons who are required to receive training under subsection 65 (2) of the Act receive the training at least annually.

# The Licensee failed to comply with the RHA s. 14. (5); Staff training

# s. 14. (5); Staff training

14. (5) The licensee shall ensure that the persons who are required to receive the training described in subsection 65 (5) of the Act receive that training on an ongoing basis, namely at least annually

after receiving the training described in subsection (4).

# The Licensee failed to comply with the RHA s. 24. (5); Emergency plan, general

## s. 24. (5); Emergency plan, general

24. (5) The licensee shall,

# Specifically, the Licensee failed to comply with the following subsection(s):

# s. 24. (5), (a)

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,

# s. 24. (5), (a), 1.

(i) the loss of essential services,

# s. 24. (5), (a)

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to.

# s. 24. (5), (a), 2.

(ii) situations involving a missing resident,

# s. 24. (5), (a)

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to

# s. 24. (5), (a), 3.

(iii) medical emergencies,

# s. 24. (5), (a)

(a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to.

# s. 24. (5), (a), 4.

(iv) violent outbursts;

# The Licensee failed to comply with the RHA s. 29.; Administration of drugs or other substances

## s. 29.; Administration of drugs or other substances

29. If one of the care services that the licensee or the staff of a retirement home provide to a resident of the home is the administration of a drug or other substance, the licensee shall ensure that,

# Specifically, the Licensee failed to comply with the following subsection(s):

# s. 29. (c)

(c) neither the licensee nor a staff member administers a drug to a resident in the home unless the licensee or the staff member has received training in the procedures applicable to the administration of the drug;

# The Licensee failed to comply with the RHA s. 30.; Storage of drugs or other substances

# s. 30.; Storage of drugs or other substances

30. If drugs or other substances are stored in a retirement home on behalf of a resident, the licensee of the home shall ensure that,

#### Specifically, the Licensee failed to comply with the following subsection(s):

# s. 30. (a)

(a) the drugs or other substances are stored in an area or a medication cart that,

# s. 30. (a), 2.

(ii) is locked and secure,

# The Licensee failed to comply with the RHA s. 65. (4); On-going training

### s. 65. (4); On-going training

65. (4) The licensee shall ensure that the persons who are required to receive the training described in subsection (2) receive on-going training as described in that subsection at the times required by the regulations.

# **Closed Citations**

During an inspection, an inspector may follow-up with areas of non-compliance cited during a previous inspection, or verify compliance with areas initially cited during the current inspection. The inspector has verified that at the time of this report, the licensee was able to demonstrate that the following areas have come into compliance.

# Ontario Regulation 166/11:

### s. 23. (1); Behaviour management

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

# s. 23. (1), (a)

(a) techniques to prevent and address resident behaviours that pose a risk to the resident or others in the home;

# s. 23. (1); Behaviour management

23. (1) Every licensee of a retirement home shall develop and implement a written behaviour management strategy that includes,

### s. 23. (1), (b)

(b) strategies for interventions to prevent and address resident behaviours that pose a risk to the resident or others in the home;

# **NOTICE**

The Final Inspection Report is being provided to the Licensee, the Registrar of the RHRA and the home's Residents' Council, if any.

Section 55 of the RHA requires that the Final Inspection Report be posted in the home in a conspicuous and easily accessible location. In addition, the Licensee must ensure that copies of every Final Inspection Report from the previous two (2) years are made available in the Home, in an easily accessible location.

The Registrar's copy of the Final Inspection Report, as it appears here, will be included on the RHRA Retirement Home Database available online at <a href="http://www.rhra.ca/en/retirement-home-database">http://www.rhra.ca/en/retirement-home-database</a>.

Signature of Inspector	Date
Sported	July 6, 2023